



Have you considered an automatic deposit of your gifts to St. Mary's???

You aren't comfortable passing the collection plate without putting an envelope in the basket???

Choose to continue to receive (check "gray" box on this form) envelopes & check the box. You can put your regular (empty) envelope in the collection & check the box "I support St Mary thru autodep." If you don't check the gray box, you will not receive offertory envelopes.

Return this form to our **parish office**. With just a couple days notice, we can change or end your withdrawal for you at the parish office. We are offering two days (5th or 20th) for withdrawals, which can be withheld bi-monthly, monthly, quarterly, bi-yearly, or annually on these dates. If you have any questions, contact Dixie at the parish office 352-2493 or SMC.Adm@q.com

<input type="checkbox"/> Yes, continue to mail me offertory envelopes.
<input type="checkbox"/> New Withdrawal
<input type="checkbox"/> Change Existing Withdrawal

Auto-Deposit of Contributions: Member Authorization

Return to: St. Mary Parish, 2700 Horton Rd, Waverly, IA 50677

Phone: 319-352-2493 Fax: 319-352-1749 Email: SMC.Adm@q.com

Name of Member (Please Print)		
Address		
City	State	Zip

Building Capital Campaign: Total amount to be paid to campaign: \$_____.

Please withdraw \$_____ per period as stipulated below.

- Monthly on the **5th or 20th** (circle one) of each month
- Twice a month on the **5th and 20th** of every month
- Quarterly on the **20th** of March, June, Sept. & Dec.
- Semiannually on the **20th** of July & Dec.
- Annually on the **20th** January

Automatic withdrawals to start in _____(month), 20__ and end in _____(month). 20__.

Offertory Contribution: Please withdraw \$_____ per period as stipulated below.

- Monthly on the **5th or 20th** (circle one) of each month
- Twice a month on the **5th and 20th** of every month
- Quarterly on the **20th** of March, June, Sept. & Dec.
- Semiannually on the **20th** of July & Dec.
- Annually on the **20th** January

Begin withdrawals (month): _____

Notify the Parish Office when you want this contribution changed or terminated. _____

Your Bank Information: Please take my contribution directly from the account specified:

- Checking Account** (attach a voided check) or **Savings Account** (attach a savings deposit slip)

Financial Institution/Branch: _____

Financial Institution Address: _____

Routing #: _____ Account #: _____
(found between these symbols | : | :)

I (we) hereby authorize St Mary Church, hereinafter called COMPANY, to initiate debit entries & to initiate, if necessary, credit entries & adjustments for any debit entries in error to my (our) account indicated above & the financial institution named above, hereafter called FINANCIAL INSTITUTION, to debit/credit the same such account for _____. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. This authority is to remain in full force & effect until COMPANY has received written notification from me (or either of us) of its termination in such time & in such manner as to afford COMPANY & FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Authorized signature on my account: _____ Date: _____

Attach a voided check or savings deposit slip and return to our PARISH office. Thanks!